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PATENT



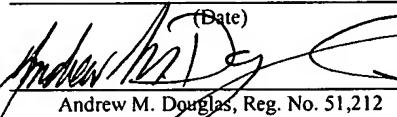
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Anthony Viole et al.
Appl. No. : 10/078,283
Filed : February 14, 2002
For : MULTILUMEN CATHETER FOR
MINIMIZING LIMB ISCHEMIA
Examiner : Mark W. Bockelman
Group Art Unit : 3762

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all
marked attachments are being deposited with
the United States Postal Service as first-class
mail in an envelope addressed to:
Commissioner for Patents, P.O. Box 1450,
Alexandria, VA 22313-1450, on

August 2, 2004

(Date)

Andrew M. Douglas, Reg. No. 51,212

RESPONSE TO OFFICE ACTION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This paper is being filed in response to the office action mailed April 1, 2004 (the Office Action).

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.

08/06/2004 WASFAW1 00000018 10078283

01 FC:2202
02 FC:2201

117.00 OP
86.00 OP

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AMENDMENT / RESPONSE TRANSMITTAL

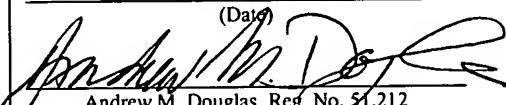
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 Andrew M. Douglas, Reg. No. 51,212

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

- Response to Office Action in 18 pages.
- The present application qualifies for small entity status under 37 C.F.R. § 1.27.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	33 - 20 = 13	2202 (\$9)	13 x 9 =	\$117
Independent Claims	6 - 4 = 2	2201 (\$43)	2 x 43 =	\$86
Multiple Claim		2203 (\$145)		\$
1 Month Extension		2251 (\$55)		\$55
2 Month Extension		2252 (\$210)		\$
3 Month Extension		2253 (\$475)		\$
			TOTAL FEE DUE	\$258

- An extension of time is hereby requested by payment of the appropriate fee indicated above.
- A check in the amount of \$258 is enclosed.
- Return prepaid postcard.

- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



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